DELINEATION OF PRIVILEGES - OBSTETRICS AND GYNECOLOGY

For use of this form, see AR 40-68; the proponent agency is OTSG

(DA Form 5440A-R Must be Completed and Attached to this Form)

REQUESTED BY		DATE		

PRIVILEGES		RECOMMENDATIONS BY DEPT./SVS. CHIEF			
Obstetric-gynecologic clinical privileges are divided into four categories *(levels)*. These categories are based on classification developed by the American College of Obstetricians and Gynecologists and published in **Standards for Obstetric-Gynecologic Services,** Sixth Edition. Check category and procedures requested.		APPROVED WITHOUT LIMITATION	APPROVED REQUIRES QUAL. SUPRV.	APPROVED WITH MODIFI-CATIONS	NOT APPROVED
Category I. Emergency Care.					
Diagnosis and therapy with minimal threat to life. Physical has minimal formal training in the discipline, but has training and experience in the care of specific conditions.					
a. Normal Antepartum and Postpartum Care					
b. Normal Labor and Delivery					
c. Maternal-Fetal Monitoring					
d. Episiotomy and Repair of Second Degree Laceration					
e. Local Infiltration Anesthesia					
f. Pudendal Block Anesthesia					
g. Use of Oxytocic Drugs After Completion of Third Stage					
h. Sigmoidoscopy					
Category II. Category I					
Major diagnosis and therapy but with no significant threat to life. Physician has the training specified below, and experience in the care of specific conditions.					
MONTHS TRAINING IN OBSTETRIC PROGRAM	MONTHS TRAINING IN GYNECOLOGIC PROGRAM				
a. Cervical Dilation and Curettage *(Including Vacuum)*					
b. Biopsy of Cervix, Endometrium, or Vulva					
c. Abdominal Salpingo-oopherectomy, Ovarian Cystectomy					
d. Abdominal Tubal Interruption					
e. Incidental Appendectomy					
f. Amniocentesis					
g. Repair of Third and Fourth Degree Lacerations					
h. Drainage/Marsupialization of Bartholin Cyst					
i. Fetal Scalp Sampling					
j. Neonatal Resuscitation					
k. Neonatal Resuscitation					
l. Elective Low Forceps					
m. Manual Removal of Placenta and Postpartum Uterine Exploration					
n. Circumcision of Newborn					
Category III. Categories I and II					
Major diagnosis and therapy with possible threat to life. Physician has completed residency training in the specialty or has extensive training or experience in the care of specific conditions.					
a. Hysterosalpingography					
b. Hysteroscopy					
c. Laparoscopy, Diagnostic and Operative					
d. Ureteroscopy and Cystoscopy					
e. Supraclavicular or Other Superficial Node Biopsy					
f. Abdominal Hysterectomy					

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PRIVILEGES	APPROVED WITHOUT LIMITATION	APPROVED REQUIRES QUAL. SUPRV.	APPROVED WITH MODIFI-CATIONS	NOT APPROVED
g. Partial Omentectomy				
h. Myomectomy and Uterine Plastic Procedures				
i. Urethrovesical Suspension				
j. Repair of Cystocele and Rectocele				
k. Repair of Injury to Bladder				
l. Vaginal Hysterectomy				
m. Vaginal Tubal Interruption				
n. Cervical Conization				
o. Cervical Cerclage				
p. All Vaginal Deliveries				
q. All Caeserean Deliveries				
r. Intrauterine Radioactive Source Applications				
s. Venous Catheter Insertion				
t. Paracervical Anesthesia				
u. Tubal Reconstructive Procedures Not Using Microsurgery				
Category IV. Categories I, II, and III Unusually complex or critical diagnosis and therapy with possible serious threat to life. Physician has formal training in specific diagnosis or therapy. This training may have been within residency.				
a. Extirpative and Reconstructive Gynecologic Surgery, Including Radical Hysterectomy, Vulvectomy, Lymph-adenectomy, and Exenteration				
b. Surgical Repair of Injury to Bowel, Ureter, and Pelvic Vessels				
c. Bowel Resection and Bypass				
d. Bowel-Urinary Conduits				
e. Tubal Reconstructive Procedures Using Microsurgery				
f. Urodynamic Examination				
g. Colposcopy				
h. Obstetric Ultrasound Imaging				
i. Intra-amniotic Operative Procedures				
j. Surgical Application of Lasers				
k. Placement of Intra-arterial Catheter				
l. Regional Anesthesia				
CATEGORY I, II, III, IV *(Identify Category)*				
EXCEPTIONS *(Specify)*				
ADDITIONAL PRIVILEGES *(Specify)*				